

**Opening Statement of Chairman Walden
Subcommittee on Health
“Combating the Opioid Crisis: Prevention and Public Health Solutions”
March 21, 2018**

(As prepared for delivery)

Today marks the second of three legislative hearings advancing collaborative, bipartisan legislative solutions to help combat the opioid crisis.

The unprecedented plague of opioid addiction and substance use disorder in our country requires an unprecedented response. While this committee spearheaded the legislative efforts in CARA and Cures that has already devoted a record amount of federal resources to address this crisis, we can and must do more to meet this growing need.

This epidemic knows no geographic, political, or socio-economic bounds. I’ve held roundtables in my district in Oregon – places like Hermiston, Grants Pass, and Medford – when you talk to providers, patients, and their families, you can feel the sting of this crisis in the community.

President Trump rightly called it the “Crisis Next Door,” and earlier this week, rolled out an ambitious plan. I was pleased to see that several of his proposals overlap with the work of this committee and I know that working across the aisle and with the administration we can arm agencies, health care providers, researchers, and patients with the tools they need. We stand ready to work with the President and his administration to put a stop to this crisis once and for all.

Over the span of two days, we will consider a range of bills from Members on both sides of the aisle – 25 bills, in fact, covering the full spectrum of prevention and public health – and we will hear from 19 witnesses.

The bills we will consider today will strengthen the Food and Drug Administration’s (FDA) ability to understand several aspects of the opioid crisis, including: the risks of long-term opioid use and how authorities can better intercept dangerous illicit products at international mail facilities.

We will hear about legislation that will facilitate the efficient development of treatments for substance use disorders, and legislation that will encourage

alternatives to opioids for the treatment of pain. These are two areas of medicine that have suffered from a lack of innovation and development and I am optimistic that we can take tailored steps to encourage progress with the right solutions.

Rep. Latta's amendment in the nature of a substitute to H.R. 4284, Indexing Narcotics, Fentanyl, and Opioids (INFO) Act would create a public and easily accessible electronic dashboard linking to all of the nationwide efforts and strategies to combat the opioid crisis, as well as create an Interagency Substance Use Disorder Coordinating Committee to review and coordinate research, services, and prevention activities across all relevant federal agencies. This will be a tremendous resource for patients, their families, and our local communities.

Rep. Mullin's amendment in the nature of a substitute to H.R. 3545, the Overdose Prevention and Patient Safety Act, which would allow for limited sharing of substance use disorder treatment records between health providers and place strong discrimination prohibitions in statute to protect people seeking and receiving substance use disorder treatment. I understand this issue is a deeply sensitive one, but it is important that we have a thoughtful discussion about ensuring that patients seeking these services receive parity and the same quality treatment that is provided to patients with other chronic disorders. Substance use disorder is a medical illness and we must treat it that way. Removing the stigma of addiction is one of the most important things we as members of Congress can do to respond to this national emergency and will dramatically change how we prevent and treat this complex disease.

Rep. McKinley's H.R. 5176, Preventing Overdoses While in Emergency Rooms (POWER) Act, would provide resources for hospitals to develop discharge protocols for patients who have had an opioid overdose, such as the provision of naloxone upon discharge and referrals to treatment and other services that best fit the patient's needs.

I'd also like to thank my colleague Rep. Griffith for leading a discussion draft that would authorize federal support for a number of innovative activities in state-based prescription drug monitoring programs (PDMPs).

These are just a handful of the solutions that our colleagues, Republicans and Democrat, have brought forward.

I'd like to thank our four panels of witnesses for being here today and tomorrow, and I look forward to your feedback on these important issues.